

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Conservative Campaign Committee</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00495010		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>WRKO</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>04 / 11 / 2013</b>		
Mailing Address 20 Guest Street Floor 3			Amount <span style="border: 1px solid black; padding: 2px;">3187.5</span>		
City Brighton		State MA	Zip Code 02135-2040		
Purpose of Expenditure Radio Ads 4/15 to 4/21		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : 71413		
Name of Federal Candidate Supported or Opposed by Expenditure: Michael Sullivan			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3187.5</span>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2013 <input checked="" type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Mailing Address			Amount <span style="border: 1px solid black; padding: 2px;"> </span>		
City		State	Zip Code		
Purpose of Expenditure		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate Supported or Opposed by Expenditure:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>					
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;">3187.50</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Kelly Lawler		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>04 / 11 / 2013</b>	

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +9A-N5HCB  
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Form/Schedule: F24N

Transaction ID :

To report Expenditures for Special Election being held 4/30/2013

Form/Schedule:

Transaction ID: